

## Retail Food Establishment Inspection Report

Floyd County Health Department Telephone:812-948-4726

X000

Based on an inspection this day, the item(s) noted below identify violations of 410 IAC 7-24, Indiana Retail Food Establishment Sanitation Requirements.

The time limit for correction of each violation is specified in the narrative portion of this report.

			Tative portion of this					
Establishment Name				(mm/d		f Inspection PERMIT # d/vr)		
Token Club				812 725 /001		19.330		
Establishment Address (number and street, city, state, zip code)				*	10/31/2019			
506 Perl St. Hen Albert, 12 47150				Purpose:	Fallow u	D D along	In Data	
Then Chb				. Routine	Follow-up Release Date  TODAY			
Owner's Address				2. Follow-up	Summary of Violations:			
				3. Complaint	Summary of Violations:			
Person in Charge				4. Pre-Operational	C_1 NC_2 R 🛇			
Jeanette Bronn				5. Temporary				
Responsible Person's E-mail				6. HACCP	Menu Type (See back of page)			
G. (III.)				7. Other (list)	1_ 2 3×4 5			
Certified Food Manager  Debbie Decker (10/2/22)					12	3 <u></u>	_45	
	-			-				
		E IDENTIFIED IN THE CHECKLIST AND NARR					I .	
		TED FROM PREVIOUS INSPECTIONS ARE DE		MARY OF VIOLATIONS"	AND IN THE M			
Section#	†	R	Narrative		To Be Corrected By			
443	C	Margined sanificer at 400 + /ppm  Observed sanificar rags throughout allowed to day  - Keep a sanificar bushed at all times  Observed no quad, amoin test strips annihilde				Corrected		
245	NC	NC Observed savifier rags throughout allowed to dry					Today	
		- Keys - sanificer buthet	at all times				1	
29	NC	Observed no good, anguin	n test strips	amilable		1 .	seek	
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Received by	(name and t	itle printed);	1	nspected by (name and title	printed):			
Jeanette Brown				A.). Ingram (EHG)				
Received by (signature):				Inspected by (signature):				
Contract of the said				ay				
cc:				cc:				
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